

VERMONT Blueprint for Health

Smart choices. Powerful tools.

The Facts About Chronic Conditions

FACT:

Caring for Vermonters with chronic conditions consumes more than 83% of the \$2.8 billion spent in Vermont each year on health care.

FACT:

Chronic conditions are the leading cause of illness, disability and death in the United States.

FACT:

Over 50% of all adult Vermonters suffer from one or more chronic conditions.

FACT:

Over 40% of the direct care cost for Americans with chronic conditions comes from public funds.

FACT:

The number of people with chronic conditions—and the cost of their care—is expected to double by the year 2050.

Sources:

Vermont Department of Health; Robert Wood Johnson Foundation; National Institute of Health.

Chronic conditions are the most serious (and most costly) health problem facing Vermont today—and

unless we act now, the problem will only get worse.

The leading chronic conditions in Vermont include heart disease, diabetes, asthma, hypertension, depression, cancer, liver disease and emphysema. All are serious conditions that, left untreated, can lead to the need for acute and/or emergency care—typically the most expensive and complex care of all.

And yet, most chronic diseases can be prevented, and when they do occur, can be successfully controlled by better lifestyle choices, regular medical monitoring, early treatment and/or appropriate medications.



The Vermont Blueprint for Health is a statewide initiative that provides Vermonters with chronic conditions the information, tools and support they need to successfully manage their health.

Inaugurated in 2004, the Vermont Blueprint for Health is off to a positive start and is already making a difference in several Vermont communities. Continued support for the Blueprint will assure that more Vermonters will benefit, helping not only to improve their health but also controlling the escalation of health care costs in our state.

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Background

The increasing number of Vermonters who experience serious health complications from chronic conditions, and the escalating cost of their care, demands a response.

The Vermont Blueprint for Health is built on the premise that prevention and improved chronic illness care will benefit the state and its people in three important ways:

1) By promoting healthy lifestyle options and prevention efforts, including support for infrastructure changes to foster active communities.

2) By helping Vermonters to live longer, healthier lives through appropriate and timely medical treatment and sound lifestyle choices.

3) By reducing overall demand for medical treatment services, many of which are currently funded through state programs, can lead to significant savings to the state and its residents.

The Vermont Blueprint for Health is based on the Chronic Care Model developed by Dr. Edward Wagner as part of the Improving Chronic Illness Care (ICIC) program of the Robert Wood Johnson Foundation, and on the work of Dr. Donald Berwick of the Institute for Healthcare Improvement. The Chronic Care Model integrates public health expertise with clinical health care delivery systems in order to deliver “the right care at the right time.”

Vision

The Vermont Blueprint for Health is a whole new way of looking at chronic care. It is **proactive**, not reactive; holistic, not fragmented. Through prevention and planning, the Blueprint aims to help people with or at risk for chronic conditions stay as healthy as possible and avoid the need for expensive care and services.

In order to implement the Blueprint successfully, some significant changes to the state's health care system are needed. These include:

- **Promoting public policies** that support healthy lifestyles and effective health care.

- **Effective and accessible community-centered programs and activities** to help people with chronic conditions successfully adopt and maintain healthier lifestyles. Because physical activity is a key component in the management of many chronic conditions, the first Blueprint focus area is on making daily physical exercise a community norm.

- **Self-management information and tools for individuals** through

a wide range of information channels and innovative programs, workshops, etc. Patient participation is absolutely critical to the Blueprint, which ultimately is a patient-centered initiative.

- **Improved health care information systems**, including patient registries, give physicians and other medical professionals the critical information and timely reminders they need to deliver the best care. Registries are also used to identify groups of patients that need additional attention and to facilitate quality improvement in health care.

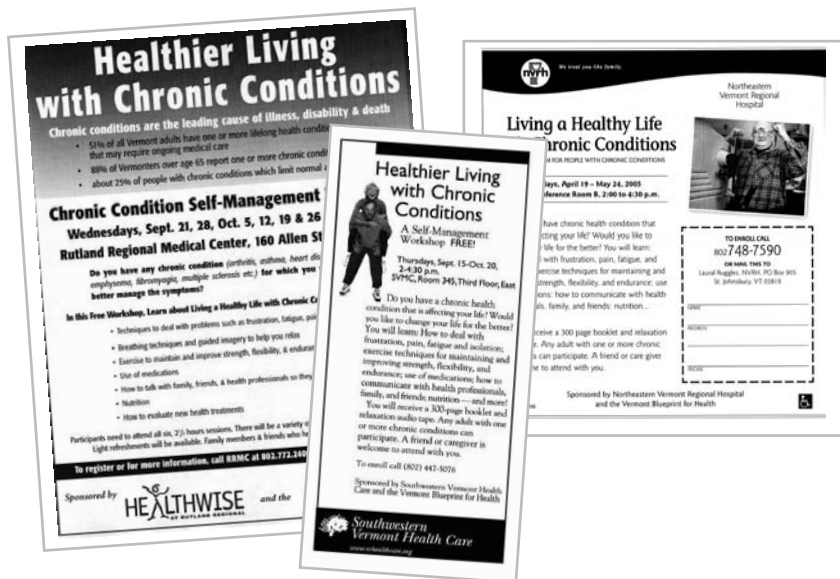
- **Ideas and tools to help providers care for patients**, including centralized information systems, patient follow-up tools and evidence-based treatment guidelines.

- **Health system organizations (insurers, non-profits, etc.) will** support consumers and providers with coordinated approaches to quality standards, patient education and disease management; incentives to deliver better care, and alignment of their work with the Blueprint and other health reform initiatives.



Good data means good decisions.

Patient registries will give doctors and other health care professionals complete and accurate information about a patient's history and treatment, saving time and helping promote patient safety.



Patient self-management: a key component of the Vermont Blueprint for Health. In 2005, hospitals in two pilot communities sponsored "Healthier Living Workshops" for patients with chronic conditions. Over 150 people completed the workshops, which help patients take responsibility for managing their own health.

2005: The Blueprint is launched

In 2005, the Vermont Blueprint for Health took the first steps towards a planned, statewide rollout by selecting two hospital service areas as **pilot communities**: Southwestern Medical Center in Bennington and Northeastern Regional Hospital in St. Johnsbury. Grants were awarded to fund local project managers to oversee implementation in both pilot communities.

Interest in the Blueprint is widespread and has won the support of national as well as state leaders. The Agency for Healthcare Research and Quality of the federal Department of Health and Human Services is providing invaluable assistance in helping to design an evaluation strategy for the Blueprint.

Public policy

Government support of the Blueprint comes not only from its financial contribution, but also alignment of policies and regulations. In 2005, the Health Resources Allocation Plan, prepared by BISHCA, incorporated implementation of the Blueprint; the Global Commitment includes steps to make the Medicaid program a full partner; and the Department of Health has adopted the Blueprint as an organizing framework and is realigning programs and operations to better improve health outcomes.

Community support

The Vermont Blueprint for Health encourages communities to become healthier places and to offer services that promote health. In 2005, the Vermont Department of Health awarded grants in both pilot communities

to develop neighborhood walking programs. Pilot communities are encouraged to list health promotion services and provide an Internet link to Vermont 2-1-1 area resource listings. Grantees also receive technical assistance and guidance to help with start up of walking programs and aid local planners develop supporting policies and plans for environmental change (such as building sidewalks and recreational trails).

Self-management information and services

Patient participation is critical for the success of the Vermont Blueprint for Health. The good news is that most Vermonters seem eager to take the central role in the management of their health. In 2005, over 150 people completed the "Healthier Living Workshop" developed by Stanford University and adopted by the Blueprint. This highly-acclaimed, evidence-based course teaches successful self-management of chronic conditions through a variety of techniques. At least 30 people have been trained to be workshop leaders and workshops have been held in Bennington, St. Johnsbury, Bellows Falls, Burlington, Rutland, Springfield, Waterbury, White River Junction and Windsor.

Information systems development

The Blueprint has participated in development of an integrated health data system in several ways. The Vermont Health Record is a web-based patient registry that is being tested by physician offices in pilot communities and other locations throughout the state. The registry

will allow providers to proactively manage their patients care, calling them in for needed care—not relying on patients' memories—and giving providers more complete information during visits. An assessment of information technology capacity in primary care practices has been completed. On-going collaboration with Vermont Information Technology Leaders (VITL) continue to assure alignment with other health information initiatives.

Provider participation

More than 75 percent of adult primary care providers in St. Johnsbury and Bennington have signed up to participate in the pilot program. The initial focus is on diabetes (a chronic condition that affects more than 29,000 Vermonters).

With the help of the Blueprint, providers are learning how to deliver effective proactive care to patients with chronic conditions.

Each participating practice has been given new, web-based information technology tools (the Vermont Health Record) to help them integrate the Chronic Care Model into their everyday routines.

Health systems

To be successful, the Blueprint for Health requires effective collaboration among insurance carriers (including Medicaid), business and other organizations to support consumers and providers make the changes that are needed. In 2005, standardized measures were developed to support payment reform. An inventory and assessment of disease management services offered by Vermont insurance carriers is currently underway.

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Goals for 2006

The Vermont Blueprint for Health is one of the best investments we can make in the future of our state. Not only can it dramatically improve the health of Vermonters, it can also strengthen our state's fiscal health by reducing the need for expensive acute and emergency care.

With the support of the legislature, we look forward to achieving several important goals in the coming year.

Major Blueprint Goals

- Expand the Blueprint for Health into one or more additional communities. An RFP to support this process will be issued early in 2006.
- Train additional leaders and offer the "Healthier Living Workshops" more frequently throughout the state.
- Help more physician practices use the Vermont Health Record to provide more complete patient information.

Sustainability

The Vermont Blueprint for Health is also a blueprint for fiscal responsibility. With improvements in both consumer self-care and proactive care management, we anticipate that the rapid increase in health care costs will be slowed, and in time, significant cost savings will result. Substantial investments to support development of this new infrastructure will be required.

These infrastructure costs include development and deployment of the integrated health information system; training and transition assistance for provider practices; expansion of self-management work to

- Expand walking programs into more communities throughout the state.
- Add at least one new chronic condition to the Blueprint and the Vermont Health Record.
- Avoid the need for duplicate data entry by upgrading the Vermont Health Record to allow automatic input of data from laboratories, pharmacies, hospitals and other sources.
- Work with laboratories, pharmacies, hospitals and other sources of data to modify their data systems to feed into the Vermont Health Record.
- Develop recommendations for a new payment system that would reward providers for high quality care and patient wellness.

include more conditions and more methods; development of infrastructure for healthy communities; and a campaign to promote participation among all sectors in this exciting new endeavor.

Long-term sustainability is contingent on significant changes throughout the health system. These include a new financial model that creates incentives for healthy behaviors and for providing high quality care; increased emphasis on prevention; and, continued investment in self management and community development for health.

Public-private partnerships

A project of the magnitude and complexity of the Vermont Blueprint for Health requires the strong commitment of multiple interest groups and stakeholders if it is to succeed.

To lead this effort, we have forged a strong public-private partnership that includes state government, health insurance plans, business and community leaders, health care providers and consumers.

A supporting organizational structure has been developed that includes an

Executive Committee working with the Commissioner of Health to set the vision and strategic direction; a Steering Committee that serves in an advisory capacity; and five statewide workgroups that assist with planning and evaluation of local implementation efforts.

A comprehensive five year strategic plan has been developed and approved by all partners and can be accessed at healthvermont.gov.

Blueprint for Health Partners

- AARP – Vermont Chapter
- Bi-State Primary Care Association
- Blue Cross-Blue Shield of Vermont
- CIGNA
- Consumer representatives
- Dartmouth College, School of Medicine
- Dartmouth Hitchcock Medical Center
- Fletcher Allen Health Care
- MVP Health Plan
- Northeast Healthcare Quality Foundation (QIO)
- Office of Senator Jeffords
- University of Vermont, College of Medicine:
 - Vermont Child Health Improvement Program
 - Area Health Education Centers
- University of Vermont, College of Nursing and Health Sciences
- Vermont Association of Hospitals and Health Systems
- Vermont Business Roundtable
- Vermont Medical Society
- Vermont Program for Quality in Health Care (VPQHC)
- Vermont Assembly of Home Health Agencies
- State of Vermont:
 - Department of Health
 - Department of Aging and Independent Living
 - Department of Banking, Insurance, Securities and Health Care Administration
 - Office of Vermont Health Access (Medicaid)
 - Department of Human Resources

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